PRODUCT PORTFOLIO REFERENCE GRID

AllWays Health Partners
Complete and Choice
Easy Tier Plans for Large Employers

Effective January 1, 2021

Great Access and Value

- As of January 21, 2021, PPO Plus members will be able to access health care outside of Massachusetts and New Hampshire through the UnitedHealthcare Options PPO network of over 690,000 providers nationwide.

- For members age 18 and younger: The first three in-network PCP sick office visits and behavioral health office visits at no cost to members*

- An enhanced prescription drug benefit option that includes a broad list of preventive medications covered before an HSA plan’s deductible

- Our fitness reimbursement provides up to $150 for individual coverage or up to $300 for family coverage per calendar year.

*Does not apply to HSA plans

The following plans represent our standard Complete and Choice portfolios. Please contact your sales executive to discuss other plan options that may be available, including our new AlliesSM HMO Newton-Wellesley Hospital Community Plus plans.
AllWays Health Partners Complete Plans for Large Employers

Effective January 1, 2021

All plans must adhere to EEOC’s available coverage requirements. All plans must retain minimum coverage requirements.

| Complete HMO 2000 with Care Complement | $2,000/$4,000 | $7,000/$14,000 | $30/$45 (D) | $150 (D) | $45 (D) | $75 (D) | $250 (D) | $500 $30 (D) | $500 |
| Complete HMO 2500 30/45 with Care Complement | $2,500/$5,000 | $7,000/$14,000 | $30/$45 (D) | $200 (D) | $45 (D) | $150 (D) | $500 (D) | $1,000 $30 (D) | $1,000 |
| Complete HMO 3000 with Care Complement | $3,000/$6,000 | $7,000/$14,000 | $25/$40 $250 (D) | $25 (D) |
| Complete HMO 3000 30/45 with Care Complement | $3,000/$6,000 | $7,000/$14,000 | $30/$45 (D) | $250 (D) | $45 (D) | $200 (D) | $500 (D) | $1,000 $30 (D) | $1,000 |
| Complete HMO 25/40 with Care Complement | N/A | $2,000/$4,000 | $25/$40 $100 $0 $75 $250 $500 $25 $500 |
| Complete HMO 500 with Care Complement | $500/$1,000 | $3,000/$6,000 | $20/$35 $150 (D) | $20 (D) |
| Complete HMO 500 20/35 with Care Complement | $500/$1,000 | $3,000/$6,000 | $20/$35 | $150 (D) | $100 (D) $200 $20 (D) $200 |
| Complete HMO 750 with Care Complement | $750/$1,500 | $3,000/$6,000 | $25/$40 $150 (D) | $25 (D) |
| Complete HMO 1000 with Care Complement | $1,000/$2,000 | $4,000/$8,000 | $20/$20 $200 (D) | $20 (D) |
| Complete HMO 1000 25/40 with Care Complement | $1,000/$2,000 | $5,000/$10,000 | $25/$40 | $150 (D) | $25 (D) |
| Complete HMO 1500 with Care Complement | $1,500/$3,000 | $5,000/$10,000 | $25/$40 $150 (D) | $40 (D) | $100 (D) | $200 (D) $20 (D) $200 |
| Complete HMO 1500 25/40 with Care Complement | $1,500/$3,000 | $5,000/$10,000 | $25/$40 |
| Complete HMO 2000 20% with Care Complement | $2,000/$4,000 $7,000/$14,000 $30/$45 (D) $250 (D) 20% (D) 20% (D) 20% (D) 20% $30 (D) 20% |
| Complete HMO 3000 20% with Care Complement | $3,000/$6,000 $7,000/$14,000 $30/$45 (D) $250 (D) $45 (D) $200 (D) $500 (D) $1,000 $30 (D) $1,000 |
| Complete HMO 4000 with Care Complement | $4,000/$8,000 $7,350/$14,700 $25/$40 $250 (D) (D) (D) (D) $25 (D) |
| Complete HMO 5000 with Care Complement | $5,000/$10,000 $7,350/$14,700 $25/$40 $250 (D) (D) (D) (D) $25 (D) |

All plans meet Medicare Part D creditable coverage requirements. All plans meet minimum creditable coverage requirements.

Great Access and Value

- As of January 21, 2021, PPO Plus members will be able to access health care outside of Massachusetts and New Hampshire through the UnumHealthCare Options PPO network of over 900,000 providers nationwide.
- For members age 18 and younger: The first three in-network PCP visits and behavioral health office visits at no cost to member.
- An enhanced prescription drug benefit option that includes a broad list of preventive medications covered before an HSA plan's deductible.
- Our fitness reimbursement provides up to $150 for individual coverage or up to $300 for family coverage per calendar year.

For more information, please visit:

allwayshealthpartners.org
AllWays Health Partners choose Choice Easy Tier Plans with Care Complement.

All plans meet Medicare Part D creditable coverage requirements. All plans meet Minimum Creditable Coverage requirements.

All plans meet the tiering standards and are measured by a set of quality benchmarks. All hospitals in our Easy Tier Hospital Network plans must meet high-quality standards and are measured by a set of quality benchmarks from publicly available resources like Leapfrog and Hospital Compare. With Easy Tier, the tiering keeps premiums lower, while the simple care experience puts you in control of your costs.

Easy Tier plans are simple to understand and analyze. This plan divides the hospital network into lower and higher cost tiers (Tier 1 (lower cost) and Tier 2 (higher cost)). In addition, the tiering is limited to these hospital networks, outpatient services, outpatient diagnostic imaging and X-ray (including ultrasound), outpatient high tech radiology (CT Scan, MRI, etc.), outpatient surgery, rehabilitation (cardiac, physical, occupational, and speech therapy), and holistic care services (i.e. acupuncture and meditation). Choice Easy Tier plans are offered as either individual or family options (note Choice Easy Tier restrictions above). Choice Easy Tier plans are not available alongside non-Choice Easy Tier plans (exceptions to offer alongside Complete HSA plans are available).

Choice Easy Tier with Care Complement plans

Ratio of Price Maximum to Annual Deductible

<table>
<thead>
<tr>
<th>Option A</th>
<th>Option B</th>
<th>Option C</th>
<th>Option D</th>
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</thead>
<tbody>
<tr>
<td>$3,000/$6,000</td>
<td>$5,000/$10,000</td>
<td>$25/$40</td>
<td>$150</td>
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<td>Tier 1: (D)</td>
<td>Tier 1: (D)</td>
<td>Tier 1: (D)</td>
<td>Tier 1: (D)</td>
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Matching Choice Easy Tier PPO Plus plans are available.

About Choice Easy Tier Plans and the Easy Tier Hospital Network

Easy Tier plans are simple to understand and analyze. This plan divides the hospital network into lower and higher cost tiers (Tier 1 (lower cost) and Tier 2 (higher cost)). In addition, the tiering is limited to these hospital networks, outpatient services, outpatient diagnostic imaging and X-ray (including ultrasound), outpatient high tech radiology (CT Scan, MRI, etc.), outpatient surgery, rehabilitation (cardiac, physical, occupational, and speech therapy), and holistic care services (i.e. acupuncture and meditation). Choice Easy Tier plans are offered as either individual or family options (note Choice Easy Tier restrictions above). Choice Easy Tier plans are not available alongside non-Choice Easy Tier plans (exceptions to offer alongside Complete HSA plans are available).

Medical Benefits (Outpatient, Inpatient, Other)

- For members age 18 and younger: The first three in-network PPO office visits and behavioral health visits in any 12-month period is covered at no cost to members.
- For no copay, deductibles, or coinsurance applies to preventive services when provided by an in-network provider.
- Out-of-pocket max for care during a benefit period.
- For 30-day supplies, a referral is needed for specialty care, with the following exceptions: hospital inpatient stay when provided by an AllWays Health Partners provider.
- Outpatient and inpatient behavioral health services.
- Emergency services covered by AllWays Health Partners provider.
- Non-Emergency Outpatient:
  - Physical, occupational, and speech therapy.
- Pharmacy Benefits:
  - Pelletarium: When choosing a pharmacy benefit, cost sharing is applied.
  - Pelletarium: When choosing a pharmacy benefit, cost sharing is applied.

Evidence of Coverage is comprised of the AllWays Health Partners Schedule of Benefits and Member Handbook. AllWays Health Partners includes AllPhy Health Plans, Inc, and AllWays Health Partners, Inc. AllWays Health Partners, Inc.

Evidence of Coverage can be found here. For information on the AllWays Health Partners Schedule of Benefits and Member Handbook, including the Evidence of Coverage, please refer to the AllWays Health Partners Schedule of Benefits and Member Handbook. For more information, please visit allwayshealthpartners.org.
Care Complement**

Care Complement** removes cost barriers to various care options. The following in-network benefits are at $0 cost sharing:

- 11 common prescriptions to treat chronic conditions, such as depression, diabetes, high cholesterol, and high blood pressure
- Cardiac rehabilitation therapy
- Medication assisted therapy office visits and certain prescription medications
- The first 6 physical/occupational therapy and chiropractic visits (per benefit period)
- The first 6 acupuncture visits (benefit limit of 20 visits per benefit period)
- Diabetes education & nutritional counseling

Complete HMO and PPO Plus plans are available without Care Complement

Embedded Deductible and/or Out-of-Pocket Maximum

All members are responsible for the individual deductible per benefit period. The family deductible can be satisfied by combining the deductibles paid by covered family members. With family coverage, the family out-of-pocket maximum is satisfied by combining the deductibles, coinsurance, and copayment amounts paid by covered family members. A covered family member will not exceed the individual out-of-pocket maximum amount.

Aggregate Deductible

With family coverage, the individual deductible amount does not apply. The entire family deductible amount must be met before benefits are payable for anyone in the family.

All Plans Include:

- Access to our strong and growing provider network that competes with other insurers
- Access to On Demand™ for convenient, high-quality virtual urgent care visits for minor illnesses or injuries right from a tablet, smart phone, or computer
- DoctorSmart™ Rewards program gives members cash back when they select to have certain services with a high-value provider
- Fitness reimbursement: Up to $150 for individual coverage or $300 for family coverage per calendar year
- Weight loss benefit: Up to 6 months of membership at Weight Watchers or Jenny Craig*
- No visit limits for mental health/substance use outpatient visits
- Childbirth education class reimbursement: up to $130 per pregnancy

Medical Benefits (Outpatient, Inpatient, Other)

- For members age 18 and younger: The first three in-network PCP sick office visits and behavioral health office visits at no cost to members**
- No copayment, deductible or coinsurance applies to preventive services when provided by an in-network provider
- Routine eye exam at no cost sharing for members diagnosed with diabetes when provided by an in-network provider**
- Physical/occupational therapy: Coverage up to 100 combined visits per benefit period
- For HMO plans, a referral is needed for any specialty care, with the following exceptions when provided by an AllWays Health Partners provider:
  - Gynecologist or Obstetrician for routine, preventive, or urgent care
  - Family planning services
  - Outpatient and diversionary behavioral health services
  - Emergency services provided by any provider
  - Routine eye exam
  - Physical, occupational, and speech therapy

Pharmacy Benefits

Our FlexRx™ pharmacy solutions control pharmacy costs while offering money and time savings for members:

- A low-cost generic tier
- An over-the-counter (OTC) drug benefit that covers many common OTC cough, cold, and allergy drugs and products with a prescription
- A 90-day supply of maintenance medications through mail order or retail pharmacies

Underwriting Guidelines

PPO Plus quotes may require a minimum of 50% of subscribers to reside within AllWays Health Partners’ service area.

Employer rate contributions must be at least 50% for individual and 33% for dual/family.

Choice Easy Tier plans are not available alongside non-Choice Easy Tier plans (exceptions to offer alongside Complete HSA plans are available).

Employer groups with less than 20 enrolled subscribers may offer any two plan options (note Choice Easy Tier restrictions above).

Employer groups with 20 or more enrolled subscribers may offer any three plan options (note Choice Easy Tier restrictions above).

Employer groups with 50% of enrolled subscribers residing within AllWays Health Partners’ service area may select the PPO Plus plan as a standalone offering.

* One per policy (either subscriber or dependent); weight loss membership benefit excludes food
** Does not apply to HSA plans

Evidence of Coverage is comprised of the AllWays Health Partners Schedule of Benefits and Member Handbook.

AllWays Health Partners includes AllWays Health Partners, Inc., and AllWays Health Partners Insurance Company.